PTO/SB08 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: 10/000070

CLAIMS AS FILED – PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
				RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))					$			$
TOTAL CLAIMS (37 CFR 1.16(c))	24	minus 20 =		x $		OR	x $	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	4	minus 3 =		x $		OR	x $	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ $		OR	+ $	
				TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

AMENDMENT A 4-18-06

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(i)) RCE		Minus			x $ 25		OR	x $ 50	
Independent (37 CFR 1.16(h))		Minus			x $ 100		OR	x $ 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					+ $ 180		OR	+ $ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B 11-17-06

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(i))	30	Minus	30	0	x $ 25		OR	x $ 50	
Independent (37 CFR 1.16(h))	4	Minus	4	0	x $ 100		OR	x $ 100	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					+ $ 180		OR	+ $ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C 6-5-07

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(i)) RCE	30	Minus	30	0	x $ 25		OR	x $ 50	
Independent (37 CFR 1.16(h))	4	Minus	4	0	x $ 100		OR	x $ 100	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					+ $ 180		OR	+ $ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.